Image# 15951094800 PAGE 1 / 1

## **FEC FORM 2**

## STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)		·					
	Jonathan Paul Lavigne							
	(b) Address (number and street) 8 Killen Hollow Drive	☐ Check if address changed				Candidate's FEC Identification Number     P60006095		
	(c) City, State, and ZIP Code						ew Amended	
	Cross Lanes	WV 25313			3	Statement X (N	I) OR (A)	
4.	Party Affiliation	5. Office Soug	ht		6. State & Dist	rict of Candidate		
	DEMOCRATIC PARTY	Presidenti	al					
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE								
7.	I hereby designate the following named political committee as my Principal Campaign Committee for the 2016 (year of election) election(s).							
	NOTE: This designation should be filed with the appropriate office listed in the instructions.							
	(a) Name of Committee (in full)							
The Official Jonathan Lavigne for President 2016 Committee								
(b) Address (number and street)								
	8 Killen Hollow Drive							
	(c) City, State, and ZIP Code							
	Cross Lanes				WV	25313		
	DE	CICNATIO	N OF OT	UED ALI	TUODIZED	COMMITTEES		
DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)								
8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.								
NOTE: This designation should be filed with the principal campaign committee.								
(a) Name of Committee (in full)								
(b) Address (number and street)								
(c) City, State, and ZIP Code								
CONTRACTOR STATE								
	I certify that I have exa	mined this Stat	ement and to	the best of	my knowledge a	and belief it is true, correct	and complete.	
e:								
	-					Date		
Ja	onathan Paul Lavigne	[Electronically Filed]			tronically Filed]	03/23/2015		
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.								

FEC FORM 2 (REV. 02/2009)